

#### OLD BUCKENHAM HALL

# Appendix 4: Adverse event report and investigation form Part 1 Overview

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The purpose of this form is to record all adverse events. The term accident is used where injury or ill health occurs. The term incident includes near misses and undesired circumstances, where there is the potential for injury. Part 1 should be filled out immediately by the manager or supervisor for the workactivity involved. Part 2 should be completed by the person responsible for health and safety. Part 3 should be completed, where appropriate, by the investigation team. The investigating team, together with managers who have the authority to take decisions, should complete part 4. When completing Parts 2, 3 and 4 refer to the guidance under 'A step by step guide to health and safety investigations'.

#### Part 1 Overview

Reported by:		Date/time of adverse event		
Incident	III health	Minor injury	Serious injury	Major injury

Brief details (What, where, when, who and emergency measures taken)		
Forwarded to:	Date	
	Time	

# Part 2 Initial assessment (to be carried out by the person responsible for health and safety)

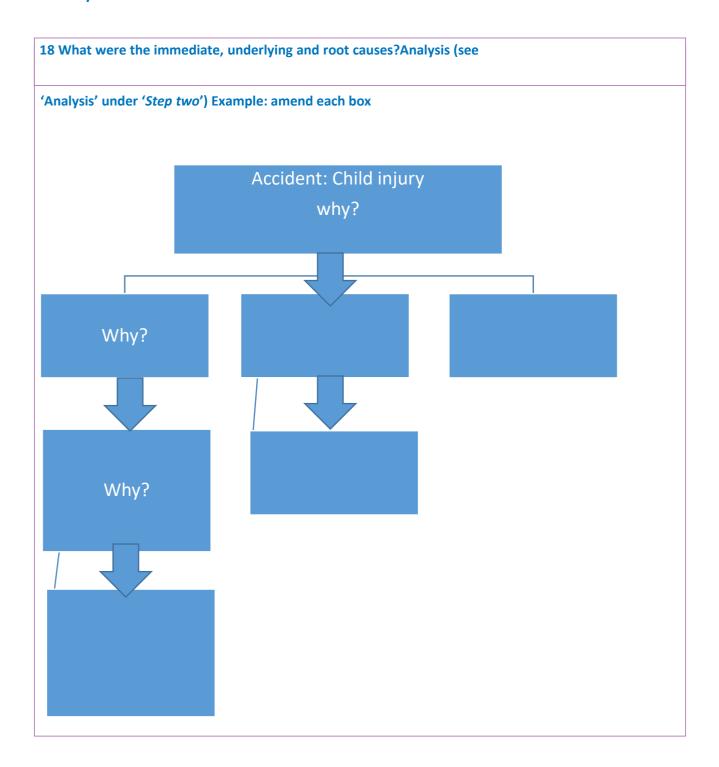
#### Actual/potential for harm Type of event **Accident** Fatal or major III health **Serious Near-miss Minor Undesired circumstance Damage only RIDDOR** reportable? Y/N Date/time reported **Entry in accident book** Y/N Date entered/reference **Investigation level** High level Low level Medium level **Basic** Χ Initial assessment carried out by: Date Further investigation required? Y/N **Priority** For investigation by:

1 Where and when did the adverse event happen?
2 Who was injured/suffered ill health or was otherwise involved with the adverse event?
3 How did the adverse event happen? (Note any equipment involved.)
4 What activities were being carried out at the time?
5 Was there anything unusual or different about the working conditions?
6 Were there adequate safe working procedures and were they followed?

7 What injuries or ill health effects, if any, were caused?		
8 If there was an injury, how did it occur and what caused it?		
9 Was the risk known? If so, why wasn't it controlled? If not, why not?		
10 Did the organisation and arrangement of the work influence the adverse event?		
11 Was maintenance and cleaning sufficient? If not, explain why not.		

12 Were the people involved competent and suitable?		
13 Did the workplace layout influence the adverse event?		
14 Did the nature or shape of the materials influence the adverse event?		
15 Did difficulties using the plant and equipment influence the adverse event?		
16 Was the safety equipment sufficient?		
17 Did other conditions influence the adverse event?		

### Analysis and further action



19 What risk control measures are needed/recommended?			
1			
2			
3			
4			
5			
6			
20 Do similar risks exist elsewhere? If so, what and where?			
21 Have similar adverse events happened before? Give details.			

### Part 4 The risk control action plan

22 Which risk contro	I measures should	d be implemented	l in the long	and short term?
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Control measure	Completion date	Person responsible
1		
2		
3		
4		
5		

23 Which risk assessments and safe working procedures need to be reviewed and updated?

	Name of risk assessmentsafe working procedure	Completion date	Person responsible
1			
2			
3			
4			

### Part 4 The risk control action plan

24 Have the details of the adverse event and the investigation findings been recorded and analysed? Are there any trends or common causes which suggest the need for further investigation? What did the adverse event cost?				
25 Signed on behalf of the investigation team				
Name	Signature			
26 Members of the investigation team				
Name	Position			

### Part 4 The risk control action plan

27 The findings of this investigation need to be communicated to the following managers, union and employee safety representatives

Person	Signature	Date